Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF GEORGIA	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on government-issued ure identification (for nple, your driver's use or passport). g your picture tiffication to your	Christopher First name A Middle name Sisco Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All dused	other names you have d in the last 8 years ade your married or den names.	Last Harrie and Sumx (St., St., II, III)	Last name and Sumx (St., St., II, III)
3.	you num Indi	y the last 4 digits of r Social Security iber or federal vidual Taxpayer itification number	xxx-xx-7535	

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About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ☐ I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years **DBA** Sisco Transportation Inc. Include trade names and Business name(s) Business name(s) doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 1 Penrose Drive W Savannah, GA 31410 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Chatham County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:3 of 55 Case number (if known)

Par	t 2: Tell the Court About	Your Ba	ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> ge 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Banke box.	kruptcy		
	choosing to file under	■ Ch	napter 7						
		☐ Ch	napter 11						
		☐ Ch	napter 12						
		☐ Ch	napter 13						
8.	How you will pay the fee		about how your order. If your	the entire fee when I file my petition. Please check with the clerk's office in your local court for more details you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money our attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with ted address.					
			I need to pay	a address. ay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals</i> if Fee <i>in Installments</i> (Official Form 103A).					
			I request that but is not req applies to you	at my fee be waive uired to, waive you ur family size and y	ed (You may request this option or fee, and may do so only if yo you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judur income is less than 150% of the official pover installments). If you choose this option, you musical Form 103B) and file it with your petition.	ty line that		
9.	Have you filed for bankruptcy within the last 8 years?	■ No							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	. Go to I	ine 12.					
	residence:	☐ Ye	s. Has yo	our landlord obtaine	ed an eviction judgment agains	t you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it as	s part of		

Debtor 1

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Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor or a debtor as defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1

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Debtor 1
Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	Case:20-408 otor 1 Christopher A Sis		C Doc#:1 Filed:09	1/30/20 Entered:09/30/20 14: Case numbe		
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are define sonal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		ousiness debts? Business debts are debts estment or through the operation of the busi		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer debts or busines	s debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be av	Do you estimate that after any exempt prop- vailable to distribute to unsecured creditors?		
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		□ Yes			
18.	How many Creditors do you estimate that you	1 -49		☐ 1,000-5,000	<u></u> 25,001-50,000	
	owe?	☐ 50-99 ☐ 100-1 ☐ 200-9	99	□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	□ \$100	550,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	\$ 100	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Par	t 7: Sign Below					
For	you	I have ex	kamined this petition, and I de	clare under penalty of perjury that the inform	nation provided is true and correct.	
				7, I am aware that I may proceed, if eligible, relief available under each chapter, and I ch		
				not pay or agree to pay someone who is no ne notice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this	
		I reques	relief in accordance with the	chapter of title 11, United States Code, spec	sified in this petition.	
		bankrupt and 357	cy case can result in fines up	t, concealing property, or obtaining money o to \$250,000, or imprisonment for up to 20 y		
		Christo	pher A Sisco e of Debtor 1	Signature of Debtor	2	

Executed on

MM / DD / YYYY

Executed on September 30, 2020 MM / DD / YYYY

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Debtor 1

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ John E. Pytte	Date	September 30, 2020	
Signature of Attorney for Debtor		MM / DD / YYYY	_
John E. Pytte 590555			
Printed name			
John Pytte			
Firm name			_
P.O. BOX 949			
Hinesville, GA 31310			
Number, Street, City, State & ZIP Code			_
Contact phone 912-369-3569	Email address	johnpytte@jpytte.com	
FOOFFF CA	_		_
590555 GA			
Bar number & State			

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:8 of 55

Fill	in this information to identify yo	ur case:	<u> </u>	i ago	.0 01 00
Del	otor 1 Christopher A				
Deb	First Name	Middle Name	Last Name		
(Spo	use if, filing) First Name	Middle Name	Last Name		
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	T OF GEORGIA		
	se number 			_	c if this is an ded filing
	ficial Form 106Sum				
			and Certain Statistical Information le are filing together, both are equally responsible f		12/15
info	rmation. Fill out all of your sched	dules first; then complete	the information on this form. If you are filing amend ck the box at the top of this page.		
Par	t 1: Summarize Your Assets				
				Your a	ssets of what you own
1.	Schedule A/B: Property (Officia 1a. Copy line 55, Total real estate	l Form 106A/B) e, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal բ	property, from Schedule A/E	3	\$	50,120.00
	1c. Copy line 63, Total of all prop	erty on Schedule A/B		\$	50,120.00
Par	t 2: Summarize Your Liabilities	s			
					abilities t you owe
2.	Schedule D: Creditors Who Have 2a. Copy the total you listed in Co		ty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	59,450.00
3.	Schedule E/F: Creditors Who Ha 3a. Copy the total claims from Pa		ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	14,987.85
	3b. Copy the total claims from Pa	art 2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	101,586.62
			Your total liabilities	\$	176,024.47
Par	t 3: Summarize Your Income a	and Expenses			
4.	Schedule I: Your Income (Official Copy your combined monthly income		le I	\$	2,504.19
5.	Schedule J: Your Expenses (Officopy your monthly expenses from	cial Form 106J) m line 22c of Schedule J		\$	2,503.50
Par	4: Answer These Questions	for Administrative and Sta	atistical Records		
6.	Are you filing for bankruptcy un No. You have nothing to rep	•	? Check this box and submit this form to the court with yo	our other sc	nedules.
7.	■ Yes What kind of debt do you have	?			
			r debts are those "incurred by an individual primarily for -9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primare the court with your other sch		ave nothing to report on this part of the form. Check the	s box and s	ubmit this form to

Official Form 106Sum

Debtor 1

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,748.55 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	4,251.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	10,736.85
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	14,987.85

Case:20-40858-EJC Doc	#:1 Filed:09/30/20	Entered:09/30/20 14:24:49	Page:10 of 55
Fill in this information to identify your case	and this filing:		
Debtor 1 Christopher A Sisco			
First Name	Middle Name La	ast Name	
Debtor 2 (Spouse, if filing) First Name	Middle Name La	ast Name	
United States Bankruptcy Court for the: SOL	JTHERN DISTRICT OF GEORG	<u> </u>	
Case number			☐ Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Propert	tv		12/15
In each category, separately list and describe item	<u> </u>	sset fits in more than one category. list the as	
think it fits best. Be as complete and accurate as information. If more space is needed, attach a sep	possible. If two married people are	e filing together, both are equally responsible	for supplying correct
Answer every question.	arate sheet to this form. On the to	p of any additional pages, write your name an	d case number (ii known).
Part 1: Describe Each Residence, Building, Land	d, or Other Real Estate You Own o	or Have an Interest In	
Do you own or have any legal or equitable inter	est in any residence, building, lan	d, or similar property?	
■ No. Go to Part 2.			
☐ Yes. Where is the property?			
Part 2: Describe Your Vehicles			
Do you own, lease, or have legal or equitable someone else drives. If you lease a vehicle, als			any vehicles you own that
·	·	atory Contracts and Oriexpired Leases.	
3. Cars, vans, trucks, tractors, sport utility v	ehicles, motorcycles		
□ No			
■ Yes			
3.1 Make: Nissan	Who has an interest in the pr	operty? Check one Do not deduct sec:	ured claims or exemptions. Put
Titan Platinum Reserve	.	the amount of any	secured claims on Schedule D:
Model: <u>4WD</u> Year: <u>2018</u>	Debtor 1 only	Creditors who have	ve Claims Secured by Property.
Year: 2018 Approximate mileage: 36,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
Other information:	☐ At least one of the debtors		portion you ourn.
SURRENDER			
NADA	Check if this is communit	y property \$40,575	\$40,575.00
	(see instructions)		
3.2 Make: Triumph	Who has an interest in the	Do not deduct sec	ured claims or exemptions. Put
T' 000 VD	Who has an interest in the pr	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
Model: 1 iger 800 XR Year: 2016	■ Debtor 1 only □ Debtor 2 only		, ,
Approximate mileage: 1,000	Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
Other information:	☐ At least one of the debtors		, , , , , , ,
SURRENDER	_	^-	
NADA	Check if this is communit (see instructions)	y property \$7,065	5.00 \$7,065.00

Official Form 106A/B Schedule A/B: Property page 1

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

Official Form 106A/B Schedule A/B: Property

\$200.00

clothing and shoes

Debtor 1		B-EJC Sisco	Doc#:1	Filed:09/30/20	Entered:09	/30/20 14:24:49 Case number (if known,	Page:12 of 55
☐ Ye	s. Describe						
Exai ■ No	farm animals mples: Dogs, cats, bi s. Describe	rds, horse	s				
■ No	-			did not already list, inc	cluding any health	aids you did not list	
				m Part 3, including any		s you have attached	\$1,650.00
Part 4:	Describe Your Financi	al Assets					
Do you	own or have any leç	gal or equ	itable interes	st in any of the followin	ng?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you ha		-		iit box, and on hand	d when you file your peti	tion
	s				••••		
I7. Depo Exai	osits of money mples: Checking, sav institutions. If	vings, or of	ther financial a		ution, list each.	credit unions, brokerage	houses, and other similar
I7. Depo Exai	osits of money mples: Checking, sav institutions. If	rings, or of you have	ther financial a	accounts; certificates of unts with the same instit	ution, list each. me:	credit unions, brokerage	houses, and other similar
I7. Depo Exai	osits of money mples: Checking, sav institutions. If	rings, or of you have	ther financial a	accounts; certificates of unts with the same instit Institution na	nution, list each. me:	credit unions, brokerage	
17. Depo Exal ☐ No ■ Ye	psits of money mples: Checking, sav institutions. If s	17.1. C	ther financial amultiple according Checking Savings traded stock	accounts; certificates of unts with the same institution national wells Farg Wells Farg Some brokerage firms, mone	o	credit unions, brokerage	\$800.00
17. Depo Exal No Yes 18. Bonc Exal No Yes	ds, mutual funds, or mples: Bond funds, in substitutions.	17.1. C 17.2. S publicly nvestment	checking Savings traded stock accounts with	wells Farg Wells Farg b to brokerage firms, mone uer name:	o y market accounts		\$800.00
17. Depo Exal No Ye: 18. Bonc Exal No Ye: 19. Non-joint	ds, mutual funds, or mples: Bond funds, in substitutions.	17.1. C 17.2. S r publicly nvestment Ins	checking Checking Checking traded stock accounts with stitution or iss erests in incomp	wells Farg corporated and unincor	o y market accounts		\$30.00
17. Depo Exal No Ye: 18. Bonc Exal No Ye: 19. Non-joint	ds, mutual funds, or mples: Bond funds, in summers.	17.1. C 17.2. S r publicly neestment Installation ab Name Sisco	checking Checking Savings traded stock accounts with stitution or iss erests in inco	wells Farg Wells Farg Wells Farg wells Farg orporated and unincor	o y market accounts	es, including an intere	\$30.00
17. Depo Exal No Yes 18. Bono Exal No Yes 19. Non-joint No Yes	ds, mutual funds, or mples: Bond funds, in summer and corporotiable instruments ir negotiable instruments in the instrum	17.1. C 17.2. S publicly nvestment Institute and interpretation ab Name Sisce Open No sa ate bonds ate bonds ate bonds	Checking Che	wells Farg Wells Farg Wells Farg wells Farg orporated and unincor	o o y market accounts porated business gotiable instrumer issory notes, and m	es, including an intere % of ownership:	\$30.00 \$30.00
8. Bonc Exal No Yes	ds, mutual funds, or mples: Bond funds, in summer and corporotiable instruments ir negotiable instruments in the instrum	17.1. C 17.2. S publicly nvestment Ins ck and int mation ab Name Sisco Open No sa ate bonds nclude pers nts are tho	Checking Che	wells Farg Wells Farg Wells Farg Some brokerage firms, mone uer name: orporated and unincor ation Inc. 1 1st, 2008	o o y market accounts porated business gotiable instrumer issory notes, and m	es, including an intere % of ownership:	\$30.00 \$30.00

Official Form 106A/B Schedule A/B: Property page 3

	Examples: Interests i	in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plan	S
	■ No			
	☐ Yes. List each acco	ount separately. Type of account:	Institution name:	
22.	Security deposits ar Your share of all unu Examples: Agreemen	sed deposits you have made so that	at you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies,	or others
	■ No □ Yes		Institution name or individual:	
23.	Annuities (A contract ■ No	t for a periodic payment of money to	o you, either for life or for a number of years)	
		Issuer name and description.		
24.		ation IRA, in an account in a quali), 529A(b), and 529(b)(1).	ified ABLE program, or under a qualified state tuition progra	m.
	☐ Yes	Institution name and description. S	eparately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or ■ No	future interests in property (othe	r than anything listed in line 1), and rights or powers exercis	able for your benefit
	•	information about them		
	Examples: Internet d No		other intellectual property from royalties and licensing agreements	
	·	information about them		
	Examples: Building p No	•	tive association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific	information about them		
M	oney or property owe	d to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	o you		
	■ No □ Yes. Give specific in	nformation about them, including wl	hether you already filed the returns and the tax years	
	■ No		oort, child support, maintenance, divorce settlement, property sett	lement
	Yes. Give specific in	nformation		
30.	benefits;		s, disability benefits, sick pay, vacation pay, workers' compensate else	ion, Social Security
	■ No □ Yes. Give specific	information		
31.	Interests in insurance Examples: Health, di		vings account (HSA); credit, homeowner's, or renter's insurance	
	_	rance company of each policy and Company name:	list its value. Beneficiary:	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1		Doc#:1	Filed:09/30/20	Entered:09/30/20 14:24:49 Case number (if known)	Page:14 of 55
If you som	eone has died.			rance policy, or are currently entitled to rec	eive property because
<i>Exa</i> ■ No	mples: Accidents, employment			or made a demand for payment o sue	
■ No		d claims of e	very nature, including	counterclaims of the debtor and rights to	set off claims
■ No	financial assets you did not a s. Give specific information	already list			
	d the dollar value of all of you Part 4. Write that number he			entries for pages you have attached	\$830.00
Part 5:	Describe Any Business-Related F	Property You O	wn or Have an Interest In.	List any real estate in Part 1.	
37. Do yo	u own or have any legal or equit	able interest in	any business-related pro	perty?	
	Go to Part 6.			,	
☐ Yes	Go to line 38.				
	Describe Any Farm- and Commer If you own or have an interest in far			or Have an Interest In.	
46. Do y	ou own or have any legal or	equitable inte	erest in any farm- or co	mmercial fishing-related property?	
	lo. Go to Part 7.				
ΠY	es. Go to line 47.				
Part 7:	Describe All Property You O	wn or Have an	Interest in That You Did N	lot List Above	
Exa	ou have other property of an mples: Season tickets, country				
■ No	s. Give specific information				
– 16	s. Give specific information	••••			
54. Ad	d the dollar value of all of you	ur entries fro	m Part 7. Write that nui	mber here	\$0.00
	_				

Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$47,640.00		
57.	Part 3: Total personal and household items, line 15		\$1,650.00		
58.	Part 4: Total financial assets, line 36		\$830.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$50,120.00	Copy personal property total	\$50,120.00
63.	Total of all property on Schedule A/B. Add line 55 + line 6	32			\$50,120.00

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Official Form 106A/B Schedule A/B: Property page 6

Case	:20-40858-EJC	Doc#:1 Filed:09/	30/20 Entered:09/30/	<u>20 14:24</u> :49	Page:16 of 55
Fill in this info	rmation to identify you	r case:			_
Debtor 1	Christopher A S	Sisco			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA		
Case number					
(if known)					☐ Check if this is an amended filing
Official Fo	orm 106C				
Schedu	le C: The Pi	roperty You C	laim as Exempt		4/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. V	Which set of exemptions are	vou claiming?	Check one only.	even if v	our spouse is filing	a with vou.
------	-----------------------------	---------------	-----------------	-----------	----------------------	-------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemptio
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$150.00		\$150.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(6)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$800.00		\$800.00	O.C.G.A. § 44-13-100(a)(6)
		100% of fair market value, up to any applicable statutory limit	
	\$1,000.00 \$150.00 \$200.00	\$1,000.00	\$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$100% of fair market value, up to any applicable statutory limit \$300.00 \$300.00 \$300.00 \$200.00 \$200.00 \$800.00 \$800.00 \$800.00 \$100% of fair market value, up to any applicable statutory limit

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De	btor 1	nristopner A Sisco			Case number (if known)		
		scription of the property and line on e A/B that lists this property	Current value of the portion you own	···· -· , ·· , ·· , · , ·· , ·· , · , ·· , ·		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	_	is: Wells Fargo m <i>Schedule A/B</i> : 17.2	\$30.00		\$30.00	O.C.G.A. § 44-13-100(a)(6)	
	Line iro	II Scriedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit		
3.	•	I claiming a homestead exemption t to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)	
	■ No						
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?							
		No					
		Yes					

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:18 of 55 Fill in this information to identify your case: Debtor 1 Christopher A Sisco Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim \$1,222.00 Freedom Road Financial Describe the property that secures the claim: \$8,287.00 \$7,065.00 Creditor's Name 2016 Triumph Tiger 800 XR 1,000 SURRENDER NADA Attn: Bankruptcy As of the date you file, the claim is: Check all that Po Box 4597 Oak Brook, IL 60522 ☐ Contingent

Official Form 106D

8908

Number, Street, City, State & Zip Code

lacksquare At least one of the debtors and another

Opened 10/18 Last Active

8/14/20

☐ Check if this claim relates to a

Who owes the debt? Check one.

Debtor 1 and Debtor 2 only

community debt

Date debt was incurred

■ Debtor 1 only
■ Debtor 2 only

☐ Unliquidated☐ Disputed☐

Nature of lien. Check all that apply.

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

☐ An agreement you made (such as mortgage or secured)

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

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Debtor 1 Christopher A Sisco			Case number (if known)				
First Name	Middle N	lame Last Name					
2.2 Pnc Bank		Describe the property that secures the cla	aim:	\$51,163.00	\$40,575.00	\$10,588.00	
Creditor's Name Atn: Bankrupt Department Po Box 94982: Br-Yb58-01-5 Cleveland, OH	: Ms:	2018 Nissan Titan Platinum Reset 4WD 36,000 miles SURRENDER NADA As of the date you file, the claim is: Check apply. Contingent					
Number, Street, City, S	State & Zip Code	☐ Unliquidated					
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgage or secured car loan)					
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)					
At least one of the deb							
☐ Check if this claim re community debt	elates to a						
Date debt was incurred	Opened 08/18 Last Active 8/15/20	Last 4 digits of account number	7220				
	•	Column A on this page. Write that number he the dollar value totals from all pages.	ere:	\$59,450.0			
Write that number here:			\$59,450.00				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:20 of 55 Fill in this information to identify your case: Debtor 1 Christopher A Sisco Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF GEORGIA Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount \$0.00 2.1 **Emily Robinson** Last 4 digits of account number \$0.00 \$0.00 Priority Creditor's Name When was the debt incurred? Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed

Type of PRIORITY unsecured claim:

☐ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

■ Domestic support obligations

☐ Other. Specify

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

No

☐ Yes

☐ At least one of the debtors and another☐ Check if this claim is for a community debt

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Debtor 1 Christopher A Sisco Case number (if known)

Revenue-Compliance Div Priority Creditor's Name	Last 4 digits of account number	·	\$511.53	\$0.00	\$511.53
ARCS-Bankruptcy 1800 Century Blvd NE, Suite 9100 Atlanta, GA 30345-3202	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	at apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the gov	ernment		
Is the claim subject to offset?	☐ Claims for death or personal in	jury while you we	ere intoxicated		
No	Other. Specify				
Yes	2018				
2.3 IRS	Last 4 digits of account number		\$10,225.32	\$0.00	\$10,225.32
Priority Creditor's Name Bankruptcy Noticing PO Box 7346	When was the debt incurred?				
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the data you file the claim	io. Chook all the	at apply		
Who incurred the debt? Check one.	As of the date you file, the claim Contingent	is: Check all the	ат арріу		
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts	vou owo the gov	aramont		
Is the claim subject to offset?	Claims for death or personal in				
■ No	☐ Other. Specify	, , , , , , ,			
☐ Yes	2016=\$3,9				
	2017=\$4,6 2018=\$1,7				
	2018=\$1,7	07.91			
State Of Michigan Office Child Support	Last 4 digits of account number	2073	\$4,251.00	\$4,251.00	\$0.00
Priority Creditor's Name Office of Child Support 235 S Grand Ave Pob 30037	When was the debt incurred?	Opened 11 Active 5/2			
Lansing, MI 48909 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	☐ Contingent	is. Oneck all the	я арріу		
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	■ Domestic support obligations				
☐ Check if this claim is for a community debt	☐ Taxes and certain other debts	uou ouro the gov			
Is the claim subject to offset?	☐ Claims for death or personal in	, ,			
■ No	☐ Other. Specify	,,			
Yes	Family Su	pport			

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

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Debtor 1 Christopher A Sisco Case number (if known)

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of

				. •
4.1	Americollect	Last 4 digits of account number	Multiple	\$1,737.00
	Nonpriority Creditor's Name Po Box 1566 1851 South Alverno Road Manitowoc, WI 54221 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 06/19 Last Active 8/01/19	-
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Associates	Attorney Georgia Emergency	-
4.2	BCG Medical Group	Last 4 digits of account number	8140	\$161.07
	Nonpriority Creditor's Name 340 Eisenhower Dr. Suite #1200	When was the debt incurred?		-
	Savannah, GA 31406 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		_

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:23 of 55 Debtor 1 **Christopher A Sisco** Case number (if known) 4.3 **Capital One** Last 4 digits of account number 2624 \$39.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/16 Last Active Po Box 30285 When was the debt incurred? 09/20 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.4 **Chase Card Services** Last 4 digits of account number \$10,199.00 8360 Nonpriority Creditor's Name Opened 07/18 Last Active Po Box 15369 When was the debt incurred? 08/20 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.5 **Chase Mortgage** Last 4 digits of account number 1133 \$30,000.00 Nonpriority Creditor's Name **Chase Records Center/Attn:** Opened 6/25/08 Last Active Correspondenc When was the debt incurred? 03/15 Mail Code LA4 5555 700 Kansas Ln Monroe, LA 71203

Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Farmers Home Administration FHMA, ☐ Yes Other. Specify deficiency, property foreclosed in 2016

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:24 of 55 Debtor 1 Christopher A Sisco Case number (if known) 4.6 **Credit First National Association** Last 4 digits of account number 4217 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/13 Last Active Po Box 81315 When was the debt incurred? 5/09/14 Cleveland, OH 44181 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Notice only Other. Specify 4.7 **Discover Financial** Last 4 digits of account number 8552 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/11 Last Active Po Box 3025 When was the debt incurred? 7/30/20 New Albany, OH 43054 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Notice only** Other. Specify 4.8 **DKG Logistics Inc** \$100.00 Last 4 digits of account number L620 Nonpriority Creditor's Name 4405 Tremont Rd When was the debt incurred? Savannah, GA 31415 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
No
No
Debtor 1 only
Contingent
Unliquidated
Disputed
Type of NONPRIORITY unsecured claim:
Student loans
Debtor 3 separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts
Other. Specify

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Debtor 1 Christopher A Sisco Case number (if known)

Helvey & Associates Nonpriority Creditor's Name	Last 4 digits of account number	6579	\$0.00		
1029 East Center St Warsaw, IN 46580	When was the debt incurred?	Opened 9/28/15 Last Active 4/11/16			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	Collection A Accts Notice only	Attorney Consumers Energy Ua			
Lanier Collection Agency	Last 4 digits of account number	Multiple	\$333.00		
Nonpriority Creditor's Name Attn: Bankruptcy 18 Park Of Commerce Blvd	When was the debt incurred?	Opened 03/20 Last Active 06/19			
Savannah, GA 31405 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	Other. Specify Medical De	bt			
Medical Data Systems (MDS)	Last 4 digits of account number	9497	\$845.00		
Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312	When was the debt incurred?	Opened 01/20 Last Active 02/19			
Vero Beach, FL 32960 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	5			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
□Yes	■ Other. Specify Collection Attorney Candler Hospital				

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Memorial Health University Physicians	Last 4 digits of account number 6181	\$3,701.98
Nonpriority Creditor's Name PO Box 630433 Cincinnati, OH 45263-0433	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
MEMORIAL HOSPITAL	Last 4 digits of account number	\$7,000.00
Nonpriority Creditor's Name 4700 WATERS AVENUE SAVANNAH, GA 31404	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
PAM - PCPKC	Last 4 digits of account number 5105	\$104.50
Nonpriority Creditor's Name PO Box 1157	When was the debt incurred?	
Milwaukee, WI 53201-1157 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	5 auto you mo, the oranni to. Orlook an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	

debt

■ No

☐ Yes

Is the claim subject to offset?

■ Other. Specify Collection

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:27 of 55 Debtor 1 Christopher A Sisco Case number (if known) 4.1 **PNC Bank** 7047 \$8,937.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 12/19 Last Active Attn: Bankruptcy Po Box 94982: Mailstop When was the debt incurred? 08/20 Br-Yb58-01-5 Cleveland, OH 44101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 River Valley C U 2000 Last 4 digits of account number \$0.00 6 Nonpriority Creditor's Name Opened 06/10 Last Active 7130 E Fulton St E When was the debt incurred? 3/10/11 Ada, MI 49301 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Notice only** Other. Specify 4.1 St. Joseph's Candler \$18,000.00 Last 4 digits of account number Nonpriority Creditor's Name 5353 Revnolds Street When was the debt incurred? Savannah, GA 31405 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify Medical

Type of NONPRIORITY unsecured claim:

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

☐ Student loans

report as priority claims

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Debtor	Case:20-40858-EJC Doc#:1 Christopher A Sisco		ed:09/30/20 14:24:49 Page Case number (if known)	:28 of 55
4.1	St. Joseph's Hospital	Last 4 digits of account number		\$18,000.00
	Nonpriority Creditor's Name 11705 Mercy Boulevard Savannah, GA 31419	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir		
	Yes	■ Other. Specify Medical		
4.1	Syncb/Rooms To Go	Last 4 digits of account number	1302	\$2,268.00
3	Nonpriority Creditor's Name			• ,
	Attn: Bankruptcy		Opened 06/19 Last Active	
	Po Box 965060	When was the debt incurred?	09/20	
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, i.e. c. a a , ou,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Student loans	a Gain.	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc	count	
4.2	TSC Accounts Receivable Solutions	Last 4 digits of account number	4986	\$161.07
0	Nonpriority Creditor's Name	Last 4 digits of account number		4.0
	2701 Loker Ave West Ste 120	When was the debt incurred?		
	Carlsbad, CA 92010-6639			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	_	Б		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Chack if this claim is for a community	☐ Student loans		

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No ☐ Yes report as priority claims

Other. Specify

☐ Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Name and Address **DOCKET COURT CLERK ASST. UNITED STATES ATTORNEY** P.O. BOX 8970 SAVANNAH, GA 31412

On which entry in Part 1 or Part 2 did you list the original creditor?

■ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Line 2.3 of (Check one):

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T. ()	6a.	Domestic support obligations	6a.	\$ 4,251.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 10,736.85
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 14,987.85
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 101,586.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 101,586.62

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Fill in this infor	mation to identify your	case:		3.000
Debtor 1	Christopher A Sis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF GEORGIA	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3			Otato		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Jity		Oldic		

Ca	<u>se:20-40858-EJC</u>	Doc#:1 Filed:09/	<u> 30/20 Entered:</u>	<u>:09/30/20 14:24</u> :49	Page:31 of 55
Fill in this i	nformation to identify your	case:			
Debtor 1	Christopher A Si	sco			
5 1 4 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT	OF GEORGIA		
0					
Case numbe (if known)	er				☐ Check if this is an
					amended filing
⊃α: -: - I	Tama 40011				
	Form 106H				
Schedu	ule H: Your Cod	lebtors			12/15
	and case number (if known ou have any codebtors? (If	, .		as a codebtor.	
	•				
■ No □ Yes					
	i n the last 8 years, have yo , California, Idaho, Louisiana			y? (Community property state nation, and Wisconsin.)	es and territories include
_		,		J ,,	
	Go to line 3.				
⊔ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only 06D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make s	sure you have listed the cre	n you. List the person shown ditor on Schedule D (Official dule E/F, or Schedule G to fil
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The creditor Check all schedules that	to whom you owe the debt
				_	. чрріў.
3.1 _N	ame			Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line☐	
	Oterat			— Scriedale O, line —	
	umber Street ity	State	ZIP Code		
3.2				☐ Schedule D, line	
N	ame			Schedule E/F, line	
				☐ Schedule G, line	
	umber Street	04-4-	710.0	_	
C	ity	State	ZIP Code		

Fill	in this information to identify your	case:							
Del	btor 1 Christophe	er A Sisco			_				
_	btor 2 puse, if filing)								
Uni	ited States Bankruptcy Court for th	e: SOUTHERN DISTRIC	CT OF GEORGIA		_				
(If kr	se number nown)		-						
0	fficial Form 106I					MM / DD	YYYY		
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If yo use. If you are separated and yo ch a separate sheet to this form The describe Employmen	our spouse is not filing w . On the top of any additi	ith you, do not inclu	ıde infor	nati	on about your s	pouse. If mor	re space is i	needed,
1.	Fill in your employment information.		Debtor 1			Debto	2 or non-fili	ng spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed		
	employers.	Occupation	Dispatcher						
	Include part-time, seasonal, or self-employed work.	Employer's name	1099						
	Occupation may include student or homemaker, if it applies.	Employer's address	self-employed						
		How long employed t	here? 2008						
Pai	rt 2: Give Details About Mo	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to	report for	any	line, write \$0 in th	ne space. Incli	ude your nor	n-filing
	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine the information	on for all e	emplo	oyers for that per	son on the line	es below. If y	you need
						For Debtor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	N/A	

0.00

N/A

4. Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Christopher A Sisco	_		Case r	number (if ki	nowi	n) -				
					For	Debtor 1			For D	Debtor	2 or	
											pouse	
	Сор	y line 4 here	4.		\$	(0.0	0	\$		N/A	_
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	(0.0	0	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5l	b.	\$	(0.0	0	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	C.	\$	(0.0	0	\$		N/A	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	(0.0	0	\$		N/A	
	5e.	Insurance	56	е.	\$	(0.0	0	\$		N/A	
	5f.	Domestic support obligations	5f		\$		0.0	_	\$		N/A	
	5g.	Union dues	50	-	\$		0.0	_	\$		N/A	_
	5h.	Other deductions. Specify:	5h	h.+	· —	(0.0	0_+			N/A	<u>.</u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.0	_	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.0	0	\$		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
	01	monthly net income.		a.	\$	950		_	\$		N/A	
	8b.	Interest and dividends	. 8l	0.	\$	(0.0	0_	\$		N/A	<u>.</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive	t									
		Include alimony, spousal support, child support, maintenance, divorce										
		settlement, and property settlement.	80		\$		0.0		\$		N/A	
	8d.	Unemployment compensation	80		\$		0.0		\$		N/A	_
	8e.	Social Security	86	е.	\$	(0.0	0_	\$		N/A	<u>. </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f	f	\$		0.0	n	\$		N/A	
	8g.	Pension or retirement income	— 8ز		\$).O	_	\$		N/A	_
	8h.	Other monthly income. Specify: No tax refund (owes)		9. h.+	· —			<u>-</u> 1 +			N/A	_
	011.	Stimulus check (\$1,200 - went to kids' mother)	— "		\$-		0.0	_	\$		N/A	
		Ebay seller	_		\$	250	_	_	\$		N/A	_
		Anticipated part-time job	_		\$_	1,300			\$		N/A	_
		Postmates	_		\$		4.1		\$		N/A	_
				1					Ė			<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	.	\$	2,504	4.1	9	\$		N/	A
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,504.19	+	\$		N/A	= \$	2,504.19
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		,		_			_	
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedular de contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep			•				chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The relea that amount on the Summary of Schedules and Statistical Summary of Certains								12.	\$	2,504.19
										L	Combi	
13.	Do y	ou expect an increase or decrease within the year after you file this form	n?								month	ly income
	_	Yes. Explain: Debtor gave two-week notice to pizza delivery journst-time job with Publix at end of September.	ob oı	n 9	/8/20	20. He aı	ntic	cipa	ates pi	cking	up an	other
		part mile jes milit abilit at ond or coptomboli										

Official Form 106l Schedule I: Your Income page 2

	in this information	tion to identify	2115 0000						
FIII	in this informa	tion to identify yo	our case:						
Deb	otor 1	Christopher	A Sisco					this is:	
Deb	otor 2							amended filing	ving postpetition chapter
	ouse, if filing)					_			the following date:
Unit	ted States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF GEO	RGIA		MN	// DD / YYYY	
	se number nown)								
0	fficial Fo	rm 106J							
S	chedule	J: Your	Exper	nses					12/15
Be info	as complete a	and accurate as	possible eded, atta	. If two married people a ch another sheet to this					
		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to			-1- hh-1-10					
			ın a separ	ate household?					
		-	st file Offic	al Form 106J-2, <i>Expenses</i>	s for Separate House	<i>hold</i> of D	ebtor	2.	
_			_	arr om 1000 E, Exponent	or or coparato ricaco.	1101G 01 D	00.01		
2.	•	e dependents?	☐ No						
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state	the							■ No
	dependents	names.			Son			2.5	☐ Yes
					Daughter			12	■ No
					Daugillei				☐ Yes ☐ No
									☐ Yes
					-				□ No
									☐ Yes
3.		penses include		No					
		f people other t d your depende		Yes					
Est exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance cluded it on <i>Schedule I:</i>				Your expe	enses
4.	The rental o	or home owners	hip exper	ses for your residence.	Include first mortgage				
		nd any rent for th			1 1349	4.	\$_		900.00
	If not includ	led in line 4:							
		estate taxes				4a.			0.00
	•	rty, homeowner's				4b.			0.00
		maintenance, re owner's associat	•	upkeep expenses dominium dues		4c. 4d.	· · ·		0.00
5.				our residence, such as ho	ome equity loans		\$ -		0.00

Debtor 1	Christopher A Sisco	Case num	ber (if known)	
6. Uti	lities:			
6a.		6a.	\$	37.50
6b.		6b.	\$	85.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.		6d.	\$	146.00
	od and housekeeping supplies	— 7.	·	170.00
	ildcare and children's education costs	8.	\$	0.00
	othing, laundry, and dry cleaning	9.	\$	
	sonal care products and services	10.	\$	60.00 95.00
	•		·	
	dical and dental expenses	11.	\$	33.00
	Insportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	250.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	·	0.00
	urance.	17.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
15b	o. Health insurance	15b.	· -	0.00
150	c. Vehicle insurance	15c.	·	265.00
	I. Other insurance. Specify:	15d.	·	0.00
	(es. Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Spe	ecify:	16.	\$	0.00
	tallment or lease payments: a. Car payments for Vehicle 1	17a.	\$	0.00
	o. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.	· -	0.00
	d. Other. Specify:	17d.		0.00
	ur payments of alimony, maintenance, and support that you did not report a		Ψ	
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	462.00
9. Otł	ner payments you make to support others who do not live with you.		\$	0.00
Spe	ecify:	19.	-	
). Otł	ner real property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	our Income.	
20a	a. Mortgages on other property	20a.	\$	0.00
20t	o. Real estate taxes	20b.	•	0.00
200	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20€	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Otł	ner: Specify:	21.	+\$	0.00
	culate your monthly expenses			
228	a. Add lines 4 through 21.		\$	2,503.50
22t	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,503.50
3. Ca l	culate your monthly net income.		L	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,504.19
	o. Copy your monthly expenses from line 22c above.	23b.	·	2,503.50
_54	100			2,000.00
230	c. Subtract your monthly expenses from your monthly income.	22	œ.	0.60
	The result is your monthly net income.	23c.	\$	0.69
For mod	you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage? No.			or decrease because o
	Voc. Evolain here:			

Fill in th	nis inform	nation to identify your	case:					
Debtor 1	1	Christopher A Sis	SCO					
		First Name	Middle Name	Las	st Name			
Debtor 2								
(Spouse if,	, filing)	First Name	Middle Name	Las	st Name			
United S	States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	T OF GEOR	GIA			
0								
Case nu	imber _						п	Check if this is an
,							_	amended filing
								•
Officia	al Form	n 106Dec						
Decl	larati	ion Ahout a	ın Individual	I Deht	or's Sch	edules		12/15
DCC	iaiati	ion About a	- III III AI VIA III	DCDL	01 3 0011	caaics		12/13
If two ma	arried ned	onle are filing together	r, both are equally respo	onsible for s	upplying correc	t information		
	a. po	opio ai o iiiii g togoiii o	,		g			
			le bankruptcy schedule					
		or property by fraud in 3 U.S.C. §§ 152, 1341, 1	n connection with a ban 519, and 3571.	Kruptcy cas	e can result in ti	nes up to \$250,0	ou, or impri	isonment for up to 20
,			0.0, 0.10 00					
	Sign	Below						
Dic	d you pay	or agree to pay some	one who is NOT an atto	rney to help	you fill out ban	kruptcy forms?		
	No							
П	Yes. N	ame of person				Attach Bar	nkruptcy Pet	ition Preparer's Notice,
_		· —						ature (Official Form 119)
Und	der nenalt	ty of periury I declare	that I have read the sun	nmary and s	chedules filed w	ith this declarati	on and	
		true and correct.	that i have read the san	illiary and c	oncadies inca v	ini inio acolarati	on and	
v				v				
Χ.		stopher A Sisco		X	Signature of De	htor O		
		pher A Sisco e of Debtor 1			Signature of De	DIOI Z		
	Jigilatart	C C. DODIO! !						
	Date S	September 30, 2020			Date			

Fil	I in this inform	nation to identify you	ur case:					
De	btor 1	Christopher A						
Do	btor 2	First Name	Middle Name	Las	t Name			
	ouse if, filing)	First Name	Middle Name	Las	t Name			
Un	ited States Bar	nkruptcy Court for the	: SOUTHERN DISTRICT	OF GEORG	BIA			
Ca	se number							
	nown)						_	heck if this is an mended filing
	fficial For		Affaira far Iralisi	ا ماد، ماد	-:::	Domlan	_	
Ве	as complete a	nd accurate as pos	Affairs for Indivi	are filing t	ogether, both ar	e equally respons	sible for supp	
		ore space is needed i). Answer every que	l, attach a separate sheet to estion.	o this form.	On the top of al	ny additional pag	es, write you	r name and case
Pa	rt 1: Give D	etails About Your M	arital Status and Where Yo	ou Lived Be	fore			
1.	-	current marital stat			, 			
•	_	ourrent martar stat						
	☐ Married■ Not married	riod						
	- Not man	nea						
2.	During the last 3 years, have you lived anywhere other than where you live now?							
	□ No	□ No						
	Yes. List	t all of the places you	lived in the last 3 years. Do	not include	vhere you live no	w.		
	Debtor 1 Pri	ior Address:	Dates Debtor lived there	1	Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
	302 Tangle Savannah,		From-To: June 1, 2019 February 20 °	-	Same as Debtor	r 1		☐ Same as Debtor 1 From-To:
	15 Royal Ir Savannah,		From-To: March 2017 June 2019		☐ Same as Debtor	r 1		☐ Same as Debtor 1 From-To:
3. stat			ever live with a spouse or k alifornia, Idaho, Louisiana, N					
	■ No							
	☐ Yes. Ma	ke sure you fill out So	chedule H: Your Codebtors (Official Form	106H).			
Do	rt 2 Explain	n the Sources of Yo	Incomo					
Га	Explain	in the Sources of 10	ur income					
4.	Fill in the tota	I amount of income y	mployment or from operat ou received from all jobs and u have income that you recei	d all busines	ses, including par	rt-time activities.	evious calen	dar years?
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income	Gross	income	Sources of in	come	Gross income
			Check all that apply.	(before exclusion	deductions and ons)	Check all that	apply.	(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:38 of 55

Christopher A Sisco Debtor 1 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income Gross income** Sources of income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$30,183.00 □ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business Operating a business For last calendar year: \$93,950.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$65,000.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Unemployment \$3,504.00 the date you filed for bankruptcy: Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? \square No. Go to line 7. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

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Debtor 1 Christopher A Sisco Case number (# known)

7.	Within 1 year before you filed for bankruptcy <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in c a business you operate as a sole proprietor. 11 alimony.	ners; relatives of any geno ontrol, or owner of 20% or	eral partners; partner more of their voting	rships of which securities; a	ch you are a gener nd any managing a	al partner; corporations agent, including one for	
	NoYes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount y		this payment	
В.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosig		ments or transfer a	ny property	on account of a d	lebt that benefited an	
	No						
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount y		this payment ditor's name	
Par	rt 4: Identify Legal Actions, Repossessions	, and Foreclosures					
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury comodifications, and contract disputes.						
	■ No						
	☐ Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case	
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below. ■ No. Go to line 11. □ Yes. Fill in the information below.		rty repossessed, fo	oreclosed, g	arnished, attache	d, seized, or levied?	
	Creditor Name and Address	Describe the Property		I	Date	Value of the	
		Explain what happened				property	
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.						
	Creditor Name and Address	Describe the action the	creditor took		Date action was aken	Amount	
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and □ No □ Yes		rty in the possessi			efit of creditors, a	
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	ey, did you give any gifts	with a total value	of more thar	n \$600 per person	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts			Dates you gave he gifts	Value	
	Person to Whom You Gave the Gift and Address:						

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

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Debtor 1 Christopher A Sisco Case number (if known) Page:41 of 55

	Person Who Received Transfer Address	property transferred payments received or debts paid in exchange		Date transfer was made			
	Person's relationship to you			paid in exchange			
	Stranger	Project Boat, Mid Kobia 20ft. Being Not running		\$1,000	July, 2020		
19.				of which you are a			
	Name of trust	Description and value	ue of the proper	ty transferred	Date Transfer was made		
Par	tt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit B	oxes, and Stora	ge Units			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial acco	unts or instrume	ents held in your name, or for y	our benefit, closed,		
	Include checking, savings, money market, or houses, pension funds, cooperatives, associated as a second cooperative cooperativ			deposit; shares in banks, credi	t unions, brokerage		
	■ No □ Yes. Fill in the details.						
		Last 4 digits of account number instrument		or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acces Address (Number, Stree State and ZIP Code)		scribe the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your ho	ome within 1 yea	ar before you filed for bankrupte	cy?		
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had to it? Address (Number, Stree State and ZIP Code)		scribe the contents	Do you still have it?		
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that som for someone.	eone else owns? Include	e any property y	ou borrowed from, are storing t	for, or hold in trust		
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the propert (Number, Street, City, State Code)		scribe the property	Value		

Part 10: Give Details About Environmental Information

For the purpose of Pa	art 10, the following	definitions apply:
-----------------------	-----------------------	--------------------

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or
regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.							
Rep	eport all notices, releases, and proceedings that you know about, regardless of when they occurred.							
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	under or i	n violation of an environn	nental law?		
		■ No □ Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice		
25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice		
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental	law? Include settlements	and orders.		
	=	No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case		
Par	rt 11:	Give Details About Your Business or	Connections to Any Business					
27.	With	thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
		☐ A partner in a partnership						
		☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to F	Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.							
		siness Name	Describe the nature of the business		loyer Identification number			
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do n	Do not include Social Security number or ITIN.			
	0:-	Turnen entation luc	Fasiable basicana		s business existed			
		sco Transportation Inc. 02 Highlander Circle	Freight brokerage	EIN:	46-3752080			
	Alma, MI 48801 RJ Vasold From-To January 1, 2008 - current					current		

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Case number (if known)

	within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
I	No					
I	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Part	12: Sign Below					
l8 U.: <u>/s/ C</u> Chri	S.C. §§ 152, 1341, 1519, and 3571. Christopher A Sisco istopher A Sisco lature of Debtor 1	p to \$250,000, or imprisonment for up to 20 y Signature of Debtor 2				
Date	September 30, 2020	Date				
Did y ■ No □ Ye		ntement of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?			
Did y		s not an attorney to help you fill out bankrupt	cy forms?			
∃Ye	es. Name of Person Attach the Ba	ankruptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).			

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Fill in this infor	rmation to identify your	case:				
Debtor 1	Christopher A Si					
	First Name	Middle Name	La	st Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	La	st Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	T OF GEOR	GIA		
Case number						
(if known)						☐ Check if this is an
						amended filing
	dividual filing under cha		this form if:		_	
You must file th	ever is earlier, unless th	ithin 30 days after you	file your bar			he meeting of creditors, itors and lessors you list
	eople are filing togethe and date the form.	r in a joint case, both ar	re equally re	sponsible for supplyi	ng correct informa	ntion. Both debtors must
	and accurate as possib your name and case nu		eded, attach	a separate sheet to th	is form. On the to	p of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims				
For any credi information b		art 1 of Schedule D: Cre	editors Who	Have Claims Secured	by Property (Office	cial Form 106D), fill in the
Identify the c	reditor and the property t	hat is collateral W	hat da yau i	ntand to do with the r	roporty that	Did you claim the property

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Freedom Road Financial	Surrender the property.	■ No
Description of property securing debt: Description of property 1,000 miles SURRENDER NADA	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Creditor's Pnc Bank	■ Surrender the property.	■ No
name: Description of property Reserve 4WD 36,000 miles SURRENDER NADA	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Christopher A Sisco	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	property of my estate that secures a debt and any personal
X _/s/ Christopher A Sisco X	
Christopher A Sisco Signature of Debtor 1	nature of Debtor 2
Date September 30, 2020 Date	

Fill i	n this information to identify your case:				directed in this form and	in Form
Deb	tor 1 Christopher A Sisco		122	A-1Supp:		
	tor 2			1. There is no pres	sumption of abuse	
	ed States Bankruptcy Court for the: Southern District	t of Georgia		applies will be r	to determine if a presur made under <i>Chapter 7</i> ficial Form 122A-2).	•
(if kno	e number 			☐ 3. The Means Test	t does not apply now be y service but it could ap	
				☐ Check if this is a		. ,
Off	ficial Form 122A - 1					
Ch	apter 7 Statement of Your Cu	rrent Monthly	y Inc	ome		04/20
attacl case	complete and accurate as possible. If two married people has esparate sheet to this form. Include the line number to number (if known). If you believe that you are exempted friging military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	which the additional informum a presumption of abus	mation a	pplies. On the top of a se you do not have pri	ny additional pages, writ marily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one of	only.				
	■ Not married. Fill out Column A, lines 2-11.					
	\square Married and your spouse is filing with you. Fill α	out both Columns A and	B, lines	2-11.		
	\square Married and your spouse is NOT filing with you	ı. You and your spouse	are:			
	\square Living in the same household and are not leg	gally separated. Fill out	both Col	umns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fil penalty of perjury that you and your spouse are living apart for reasons that do not include evac	e legally separated under	nonban	kruptcy law that appli	es or that you and your	
10 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6-e 6 months, add the income for all 6 months and divide the tot bouses own the same rental property, put the income from that	month period would be Mare tal by 6. Fill in the result. Do	ch 1 throu not includ	igh August 31. If the ame le any income amount m	ount of your monthly incon nore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commissions (be	fore all	\$ 2,204.17	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	le payments from a spou	se if	\$ 0.00	\$	
4.	All amounts from any source which are regularly por you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	rt. Include regular contrib old, your dependents, par spouse only if Column B	outions rents,	\$ 0.00	\$	
5.	Net income from operating a business, profession					
		Debtor 1				
	Gross receipts (before all deductions) \$	2,372.88 1,412.50				
	Ordinary and necessary operating expenses -\$		Сору			
	Net monthly income from a business, profession, or farm \$		here -> S	960.38	\$	
6.	Net income from rental and other real property	Debtor 1				
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$0.00 Copy	here ->		\$	
7.	Interest, dividends, and royalties			\$ 0.00	\$	

Official Form 122A-1

							Column A Debtor 1		Column B Debtor 2 c non-filing	or	
8.	Unemplo	yment co	mpensation				\$	584.00	\$		
		I Security	nount if you contend the Act. Instead, list it here	e:	ceived was a bene	fit under					
	For you	J			0.	.00					
	For you	ur spouse _.		\$_							
	benefit un not includ United Sta disability, pay paid u does not d	nder the Sole any con ates Gove or death of under cha exceed the	nent income. Do not in ocial Security Act. Also npensation, pension, per ernment in connection was of a member of the unit pter 61 of title 10, then e amount of retired pay provision of title 10 oth	o, except as state ay, annuity, or al with a disability, of formed services. I include that pay y to which you wo	ed in the next sente llowance paid by the combat-related inju If you received any only to the extent bould otherwise be e	ence, do ne nry or y retired that it	\$	0.00	\$		
	Do not indunder the under the coronaviru crime, a compensa Government death of a	clude any Federal la National us disease crime agai ation pen- ent in con a member page and	ther sources not listed benefits received under aw relating to the nation Emergencies Act (50 Lessen 2019 (COVID-19); particular and the manity, or internation with a disability of the uniformed service put the total below	er the Social Secural emergency of J.S.C. 1601 et seayments received ational or domes allowance paid by y, combat-related ces. If necessary	urity Act; payments declared by the Pre eq.) with respect to d as a victim of a writic terrorism; or the United States d injury or disability, list other sources	s made sident the ar , or	\$	0.00	\$		
	_	Tatal ama					·	0.00	Φ		
		i otai amo	unts from separate pag	jes, ir any.		+	\$	0.00	\$		
11.			al current monthly inc add the total for Colun			\$	3,748.55	+ \$ _		= \$	3,748.55
Part	2: De	etermine \	Whether the Means To	est Applies to Y	'ou					Total incon	current monthly ne
12	Calculate	NOUE OU	rrent monthly income	for the year E	allow those stone:						
12.		-	al current monthly income	•	·		Co	ppy line 11	here=>	\$	3,748.55
	Multi	iply by 12	(the number of months	s in a year)							12
	12b. The	result is y	our annual income for	this part of the fo	nrm				12	L A	44,982.60
					,,,,,				12	b. \$	
13.	Calculate	the med	ian family income tha	·		ps:			12	ь. [\$	
13.				·		ps:			12	b. \$	
13.	Fill in the	state in w	ian family income tha	at applies to you	J. Follow these step	ps:			12		
	Fill in the Fill in the Fill in the To find a	state in w number o median fa list of app	ian family income tha	hold. tate and size of I	GA 1 nousehold. line using the link s		in the sepa	arate instruc	. 13		50,128.00
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Debtor 1	Christopher A Sisco	Case number (if known)	
	Signature of Debtor 1		
Da	September 30, 2020 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14h, fill out Form 1224-2 and file it with this form		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:20-40858-EJC Doc#:1 Filed:09/30/20 Entered:09/30/20 14:24:49 Page:53 of 55 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Georgia

Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for set be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ 1,185.0 Balance Due \$ 0.0 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is:							
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for set be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is:							
Prior to the filing of this statement I have received \$ 1,185.0 Balance Due \$ 0.0 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is:	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
Prior to the filing of this statement I have received \$ 1,185.0 Balance Due \$ 0.0 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is:	0						
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3. The source of compensation to be paid to me is:							
■ Debtor □ Other (specify):							
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and asso	ciates of my law firm.						
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	of my law firm. A						
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including	g:						
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Petition and plan, Negotiations with secured creditors to reduce to market value; exemption plant preparation and filing of reaffirmation agreements and applications as needed; preparation and pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 	; anning;						
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, any other adversary proceeding, debt, motions to sell property.	requests to incur						
CERTIFICATION							
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation this bankruptcy proceeding.	of the debtor(s) in						
September 30, 2020 /s/ John E. Pytte							
Date John E. Pytte 590555							
Signature of Attorney John Pytte							
P.O. BOX 949							
Hinesville, GA 31310							
912-369-3569 Fax: 912-367-3579 johnpytte@jpytte.com							
Name of law firm							

CHRISTOPHER A SISCO 1 PENROSE DRIVE W SAVANNAH GA 31410

DKG LOGISTICS INC 4405 TREMONT RD SAVANNAH GA 31415

MEMORIAL HEALTH UNIVERSITYP PO BOX 630433 CINCINNATI OH 45263-0433

JOHN E. PYTTE JOHN PYTTE P.O. BOX 949 HINESVILLE, GA 31310 DOCKET COURT CLERK ASST. UNITED STATES ATTORNEY P.O. BOX 8970 SAVANNAH GA 31412

MEMORIAL HOSPITAL 4700 WATERS AVENUE SAVANNAH GA 31404

AMERICOLLECT PO BOX 1566 1851 SOUTH ALVERNO ROAD MANITOWOC WI 54221

EMILY ROBINSON

PAM - PCPKC PO BOX 1157 MILWAUKEE WI 53201-1157

BCG MEDICAL GROUP 340 EISENHOWER DR. SUITE #1200 SAVANNAH GA 31406

FREEDOM ROAD FINANCIAL ATTN: BANKRUPTCY PO BOX 4597 OAK BROOK IL 60522

PNC BANK ATN: BANKRUPTCY DEPARTMEN PO BOX 94982: MS: BR-YB58-01-5 CLEVELAND OH 44101

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY UT 84130 GEORGIA DEPT OF REVENUE-COMPLIARNOCE BOANK ARCS-BANKRUPTCY ATTN: BANKRUPTCY 1800 CENTURY BLVD NE, SUITE 9100 PO BOX 94982: MAILSTOP BR-YB ATLANTA GA 30345-3202 CLEVELAND OH 44101

CHASE CARD SERVICES PO BOX 15369 WILMINGTON DE 19850

HELVEY & ASSOCIATES 1029 EAST CENTER ST WARSAW IN 46580

RIVER VALLEY C U 7130 E FULTON ST E ADA MI 49301

CHASE MORTGAGE IRS CHASE RECORDS CENTER/ATTN: CORRESSIPION DIETICY NOTICING MAIL CODE LA4 5555 700 KANSAS LN PO BOX 7346 MONROE LA 71203 PHILADELPHIA PA 19101-7346 ST. JOSEPH'S CANDLER 5353 REYNOLDS STREET SAVANNAH GA 31405

ATTN: BANKRUPTCY PO BOX 81315 CLEVELAND OH 44181

CREDIT FIRST NATIONAL ASSOCIATION ANIER COLLECTION AGENCY ATTN: BANKRUPTCY 18 PARK OF COMMERCE BLVD SAVANNAH GA 31405

ST. JOSEPH'S HOSPITAL 11705 MERCY BOULEVARD SAVANNAH GA 31419

DISCOVER FINANCIAL ATTN: BANKRUPTCY PO BOX 3025 NEW ALBANY OH 43054 MEDICAL DATA SYSTEMS (MDS) ATTN: BANKRUPTCY DEPT 2001 9TH AVE STE 312 VERO BEACH FL 32960

STATE OF MICHIGAN OFFICE CS OFFICE OF CHILD SUPPORT 235 S GRAND AVE POB 30037 LANSING MI 48909

SYNCB/ROOMS TO GO ATTN: BANKRUPTCY PO BOX 965060 ORLANDO FL 32896

TSC ACCOUNTS RECEIVABLE SOLUTIONS 2701 LOKER AVE WEST STE 120 CARLSBAD CA 92010-6639